PTC/SB/17 (12-04V2))
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Effective on 72/08/04.

Pursuant to the Consolidated Administrations Act of 1995.

Face nurewant to the Cons	olidated Annie	wiations Act-2007	佐/H R AR191 🏲					
Fees pursuant to the Cons				Application Nun	ober 09/942,0	09/942,061		
FEE TRANSMITTAL For FY 2005				Filing Date	August 2	August 29, 2001 Bobby Hu		
				First Named Inv	entor Bobby H			
				Examiner Name	Hadi Sha	keri		
Applicant claims sm	all entity state	ıs. See 37 CF	R 1.27	Art Unit	3723			
TOTAL AMOUNT OF PA		(\$) 920		Attorney Docket	No. 2186-0050)1 DVF		
METHOD OF PAYMENT	(check all the	at apply)	-					
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Check Cre	dit Card	Money O			Other (please identi	• /		
Deposit Account	Deposit Acco	unt Number:: 03	3-2769 Deposit A	Account Name: Co	onley Rose, P.C	:		
	dentified dep ee(s) indicate		e Director is her	•	to: (check all that a e fee(s) indicated b		r the filing fee	
	any additional CFR 1.16 ar		rpayments of fe	e(s) 🔀 Credit	any overpayments			
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FEE CALCULATION	AND EV	AMINIATION F						
1. BASIC FILING, SEAR	FILING FE			H FEES	EVARAIN	IATION FEES		
Application Type	-	Small Entity	Fee (\$)	Small Entity			Fees Paid (\$)	
Application 1100	100101	Fee (\$)	<u>: 00 (4)</u>	Fee (\$)	. 00 (4)	Fee (\$)	1 000 1 414 (4)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEE	S						Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (incl	uding Reissu	es)				50	25	
Each independent claim	over 3 (inclu	ding Reissues)				200	100	
Multiple dependent clair	ns					360	180	
Total Claims Extra Claims Fee (\$)			Fee Paid (\$)		Multiple Dependent Claims			
18 20 or HP =0 x HP = highest number of total claims paid for, if greater than 2		=	00	<u>Fee</u>	Fee (\$) Fee			
*				Ess Boid (\$)				
<u>Indep. Claims</u> 2 - 3 or		ra Claims 0 x	<u>Fee (\$)</u> =	Fee Paid (\$) 00				
HP = highest number of			or, if greater that					
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3. APPLICATION SIZE F		1100 1	c (1					
If the specification and d 1.52(e)), the application 35 U.S.C. 41(a)(1)(G) ar	size fee due i	s \$250 (\$125 f						
Total Sheets	Extra She	ets <u>N</u> ı			fraction thereof	Fee (\$)	Fee Paid (\$)	
4. OTHER FEE(S)		/30		(Tourid up to a w	note number) x		ees Paid (\$)	
Non-English Specif	ication. \$1	30 fee (no sn	nall entity disco	unt)		W.E.		
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2..